

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
MEDICAL ASSISTANCE ADMINISTRATION  
Olympia, Washington**

**To:** Chiropractors  
Managed Care Plans

**Memorandum No:** 04-34 MAA  
**Issued:** June 30, 2004

**From:** Douglas Porter, Assistant Secretary  
Medical Assistance Administration (MAA)

**For Information Call:**  
1-800-562-6188

**Supersedes:** 03-36 MAA

**Subject: Chiropractic Services for Children: Fee Schedule Changes**

<p><b>Effective for dates of service on and after July 1, 2004</b>, the Medical Assistance Administration (MAA) will implement the updated Medicare Physician Fee Schedule Data Base (MPFSDB) Year 2004 relative value units (RVUs).</p>
--

### **Maximum Allowable Fees**

MAA is updating the fee schedule with Year 2004 RVUs. The maximum allowable fees have been adjusted to reflect these changes. The 2004 Washington State Legislature **did not appropriate a vendor rate increase** for the 2005 state fiscal year.

Attached are replacement pages 7/8 and 9/10 for MAA's Chiropractic Services for Children Billing Instructions, dated June 2000. To obtain DSHS/HRSA provider numbered memoranda and billing instruction, go to the DSHS/HRSA website at <http://hrsa.dshs.wa.gov> (click *the Billing Instructions and Numbered Memorandum* link). These may be downloaded and printed.

Bill MAA your usual and customary charge.



# Fee Schedule

The following chiropractic services are allowed only for clients under 21 years of age with a referral from an EPSDT provider.

**Due to its licensing agreement with the American Medical Association, MAA publishes only the official, brief CPT™ procedure code descriptions.  
To view the entire description, please refer to your current CPT book.**

Procedure Code	Modifier	Brief Description	July 1, 2004 Max Allowable
98940		Chiropractic manipulation	\$15.87
98941		Chiropractic manipulation	21.99
98942		Chiropractic manipulation	28.79
72020		X-ray exam of spine	14.51
72020	26	Professional component	4.76
72020	TC	Technical component	9.75
72040		X-ray exam of neck spine	21.31
72040	26	Professional component	6.80
72040	TC	Technical component	14.51
72070		X-ray of thoracic spine	22.44
72070	26	Professional component	6.80
72070	TC	Technical component	15.64
72100		X-ray of lower spine	23.12
72100	26	Professional component	7.03
72100	TC	Technical component	16.10

## Modifiers

- **Professional Component only (modifier 26)** – This modifier identifies the x-ray professional component only. When the professional component (reading and interpretation of the x-ray) is performed separately, the service must be billed along with modifier 26.
- **Technical Component only (modifier TC)** – This modifier identifies the x-ray technical component only. When the technical component (taking of the x-ray) is performed separately, the service must be billed along with modifier TC.

CPT codes and descriptions are copyright 2003 American Medical Association.

**Blank page due to reformatting of the Fee Schedule.**